SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

であって MARK NEW SIEVE 722

Date: Amount Paid:

Permit #: Refund: 7-27-3 7-0307

shoreland —		Section 12	5 £ 1/4, 10 60 1/4	PROJECT LOCATION		luthorized Agent: (Pe	Ontractor:	12480 SCONIC DE) mm	Dwner's Name:	TYPE OF PERMIT REQUESTED—
$\ \ \ \ \ \ \ \ \ \ \ \ \ $	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yescontinue —▶	Section 12 , Township 10 N, Range 8	1/4 Gov't Lot Lot(s)	Legal Description: (Use Tax Statement)		Authorized Agent: (Person Signing Application on behalf of Owner(s))		enic Dr	mane b. ASMer	Dwner's Name: Allie B. RAVEN	AND USE
e, Pond or Flowage If yescontinue —	r, Stream (incl. Intermittent) If yescontinue —	W Oetta	CSM Vol & Page 779/592	19x 10# (4-5 digits)		Agent Phone:	Contractor Phone:	1100 RIVE WI. 54897	1240 Stavicas Man River W.	Mailing Address:	☐ SANITARY ☐ PRIVY [
Distance Structure is from Shoreline:	Distance Structure is from Shoreline:	Et .	Lot(s) No.	3460		Agent Mailing Address (include City/State/Zip):	Plumber:	5,5	DEDE NO	City/State/Zip:	☐ CONDITIONAL USE ☐ SPECIAL USE
e is from Shor	e is from Shor		Block(s) No.		-	ss (include City/s		1897	2 Rille	te/Zip:	SE 🗆 SPEC
	- -	10.0%	Subdivision:	Document #:	'	tate/Zip):				6484S	IAL USE 🔲 E
□ Yes • No	ls Property in Floodplain Zone?	10 House		.e. # assigned by	Attached Output Output Discrepance No	Written A	Plumber Phone:	X ZS	Cell phone.		□ B.O.A. □ C
□ Yes	Are Wetlands Present?			id (i.e. # assigned by Register of Deeds)	No	Written Authorization	Phone:	SV XX CALX	Cell Phone.	e:	□ OTHER

☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage
If yes---continue

□ Non-Shoreland

Proposed Construction:	Existing Structure					10,000,00	٨		Value at Time of Completion * include donated time & material
uction:	Existing Structure: (If permit being applied for is relevant to it)		Property	☐ Run a Business on	☐ Relocate (existing bldg)	10,000,000 Conversion	Addition/Alteration	New Construction	Project
	r is relevant to it)	- SLab	☐ Foundation	□ No Basement	Basement	□ 2-Story	☐ 1-Story + Loft	₹1-Story	# of Stories and/or basement
Length: 20 67	Length: 567						Year Round	□ Seasonal	Use
The part	A			None		3	□ 2		# of bedrooms
Width: 20 F/ Heigh	Width: 24 F7 Heigh	☐ None	□ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	Sanitary (Exists) Specify Type:	☐ (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System is on the property?
Height: 12 FT	Height: ノステノ				00 gallon)	ATC I	Well	□ City	Water

The state of the s	Proposed Construction:	Existing Structure: (If permit being applied for is relevant to it)	
4	Length: 20 67	Length: SCA	
	Width: 26 FT	width: 24 FT	
	Height: 12 FT	Height: ノスァブ	

Proposed Use	<	Proposed Structure	Dimensions	Square Footage
		Principal Structure (first structure on property)	(x)	
		Residence (i.e. cabin, hunting shack, etc.)	×	
		with Loft	×	
Residential Use		with a Porch	(×	
		with (2 nd) Porch	(×	
		with a Deck	(×	
		with (2 nd) Deck	(×	
Commercial Use		with Attached Garage	(x)	
		Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	(x)	
		Mobile Home (manufactured date)	(x)	
•		Addition/Alteration (specify)	(x)	
		Accessory Building (specify)	(x)	
		Accessory Building Addition/Alteration (specify)	(DEXOD)	SAN
				\$
		Special Use: (explain)	(x)	
		Conditional Use: (explain)	(x)	
		Other: (explain)	(X)	

Monthery FAILURE TO OBTAIN A PERMIT of STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

The secondarying information has been examined by me (us) and to the best of my four) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) you all information I (we) am (are) providing and that It will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the 8

Authorized Agent:

Owner(s): (If there are Multiple Owners listed on the

Deed All Owner

st sign $\underline{\mathrm{or}}$ letter(s) of authorization must accompany this application)

Date

Address to send permit

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Hold For Sanitary: Hold For TBA:	Signature of Inspector:	Condition(s): Town, Committee or Board Conditions Attached?		Was Proposed Building Site Delineated		Is Parcel a Sub-Standard Lot Yes (I Is Parcel in Common Ownership Yes Is Structure Non-Conforming Yes	⊒ 100 100 100 100 100 100 100 100 100 10	Issuance Information (County Use of Permit Denied (Date):	(9) Stake or Mark Propose NOTICE: All Lan For The Construction Of	rnor to the placement of construction of a structure within ten [LU] rees or the minimum required settback, the boundary line from which the setback must be wisible from one previously surveyed corner or marked by a licensed surveyor at the owner's expense. Prior to the placement or construction of a structure more than ten [10] feet but less than thirty [30] feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.	Setback to Septic Tank or Holding Tank Setback to Drain Field Setback to Privy (Portable, Composting) Feet Feet	Setback from the East Lot Line	Setback from the North Lot Line Setback from the South Lot Line Setback from the West Lot Line	Setback from the Established Right-of-Wa	Setback from the Centerline of Platted Road	300	Please complete (1) – (7) above (prior to continuing) (8) Setbacks: (measured to the closest point)	complete (1) –	(1) Show Location of: (2) Show / Indicate: (3) Show Location of (*): (4) Show: (5) Show: (6) Show any (*): (7) Show any (*):
TBA: Hold For Affidavit:	for withcomes unless meet	ected by: □Yes □N		Yes ONO		☐ Yes (Deed of Record) XNO ☐ Yes (Fused/Contiguous Lot(s)) XNO ☐ Yes (All Seed of Record) XNO	ermit Date:	Only) Sanitary Number: Reason for Denial:	ed Location(s) of New Construction, id Use Permits Expire One (1) Year from New One & Two Family Dwelling: ALL N The local Town, Village, City, State or F	Ten (LU) feet or the maintum required settback, trie inveyor at the owner's expense. Unveyor at the owner's expense. Than ten (10) feet but less than thirty (30) feet from the buse of the Department by use reyed corner, or verifiable by the Department by use.	SOO Feet SOO Feet Feet	/72 Feet	//80 Feet		HE	Measurement	o the closest point)		(1) Show Location of: (2) Show / Indicate: (3) Show Location of (*): (4) Show / Indicate: (5) Show Location of (*): (7) Show Location of (*): (8) Show Location of (*): (9) Driveway and (*) Frontage Road (Name Frontage Show: (10) All Existing Structures on your Property (11) Show: (12) Show: (13) Show Location of (*): (14) Show: (15) Show: (15) Show: (16) Show: (17) Show any (*): (17) Show any (*): (18) Show any (*): (18) Show any (*): (19) Show any (*): (19) Show any (*): (19) Show any (*): (20) Show any (*): (31) Show any (*): (42) Show any (*): (43) Show any (*): (44) Show any (*): (45) Show any (*): (47) Show any (*): (48) Show any (*): (49) Show any (*): (49) Show any (*): (40) Show any (*): (41) Show any (*): (41) Show Location of: (42) Show All Existing Structures on your Property (43) Show any (*): (44) Show: (45) Show: (46) Show: (47) Show any (*): (47) Show any (*): (48) Show any (*): (49) Show any (*): (49) Show any (*): (40) Show any (*): (41) Show any (*): (41) Show any (*): (42) Show: (43) Show any (*): (44) Show: (45) Show any (*): (47) Show any (*): (48) Show any (*): (49) Show any (*): (49) Show any (*): (40) Show any (*): (41) Show any (*): (41) Show any (*): (42) Show any (*): (43) Show any (*): (44) Show any (*): (45) Show any (*): (47) Show any (*): (48) Show any (*): (48) Show any (*): (49) Show any (*): (49) Show any (*): (40) Show any (*): (41) Show any (*): (41) Show any (*): (42) Show any (*): (43) Show any (*): (44) Show any (*): (45) Show any (*): (47) Show any (*): (48) Show any (*): (48) Show any (*): (49) Show any (*): (49) Show any (*): (40) Show any (*): (40) Show any (*): (41) Show any (*): (41) Show any (*): (42) Show any (*): (43) Show any (*): (44) Show any (*): (45) Show any (*): (47) Show any (*): (48) Show any (
wit: 🗆 Hold For Fees: 🗎	for human habitation / sleeping purposes without necessary county and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.	o they need to be attached.) of they need to be attached.)		Were Property Lines Represented by Owner Was Property Surveyed (Previously Granted by Variance (B.O.A.) yes Yno	Mitigation Required Yes XNo		# of bedrooms:	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	ocuroary line from which the setback must be measured in the minimum required setback, the boundary line from which of a corrected compass from a known corner within 500 feature.	Setback to Well	Elevation of Floodplain	Setback from Wetland 70% Slone Area on property	Setback from the River, Stream, Creek Setback from the Bank or Bluff	Setback from the Lake (ordinary high-v	Description	Changes in plans must be		roperty (regardless of what you are applying for) Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%
	Date of Approval:	Date of	Zoning District (TKB) Lakes Classification ()	Yes		Affidavit Required Yes YNO Affidavit Attached Yes YNO		Sanitary Date:	Tank (HT), Privy (P), and Well (W). has not begun. Jniform Dwelling Code.	nust be visible from one previously surveyed corner to the chief the setback must be measured must be visible from set of the proposed site of the structure, or must be			Vas No	k Feet	ark) 275	Measurement	Changes in plans must be approved by the Planning & Zoning Dept.		and/or (*) Privy (P)

City, Village, State or Federal May Also Be Required

SANITARY SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

17-0303 Allie Raven / James Ashley, Agent No. Issued To: SE Location: $\frac{1}{4}$ of NW Section 12 46 Township Range 8 Town of **Delta** W. Gov't Lot Lot Block Subdivision CSM#

For: Residential Accessory Structure Addition: [1- Story; Workshop (20' x 20') = 400 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): No accessory building shall be used for human habitation / sleeping purposes without necessary county and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete. This permit may be void or revoked if any performance conditions are not

This permit may be void of revoked if any performance conditions an

completed or if any prohibitory conditions are violated.

August 2, 2017

Tracy Pooler

Authorized Issuing Official

Date

and the same of th	1/4, 1/4 Gov't Lot Lot(s) CSM	PROJECT Legal Description: (Use Tax Statement)	Authorized Agent: (Person Signing Apprimation of hehalf o (Ownfer(s)) Agent Phone: Shrue	confictor. Franson Ox Dentry Sofractor	address of Property: The River Royal City/State/Zip The River Royal City/State/Zip	OWDERS-Name: DWKY DWIN SAFE 60	until all fees are paid. nty Zoning Department. L PERMITS HAVE BEEN ISSUED TO APPLICANT	SUBMIT COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County Planning and Zoning Depart: PO Box 58 Date Stamp (6) Washburn, WI 54891
Town of:	Vol & Page Lot(s) No. Block(s) No.	Tax 10# (4-5 digits) 938	none: Agent Mailing Address (include) Ci	Suffactor Phone: Plumber:	th-Mason 1	995) City/State/Zip		APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN Date Stamp (Second)
Lot Size	Subdivision:	Recorded Deed (i.e. Document #:	W. SYBI)	**************************************	V154856	2	Refund:	Permit #: Date:
Acreage	- Area de la companya	Recorded Deed (i.e. # assigned by Register of Deeds) Document #:	Written Authorization Attached Yes TW6	Plumber Phone:	715-209-17U	Relephones 14-4100		17-030ta

☐ Shoreland

Ls Property/Land within 300 feet of River, Stream (incl. Intermittent)
Creek or Landward side of Floodplain?
If yes—continue—

Distance Structure is from Shoreline:

Distance Structure is from Shoreline :

Is Property in Floodplain Zone?

Are Wetlands
Present?

Ves

☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage

☐ Non-Shoreland								
Value at Time of Completion * include donated time &	Project	Ä	# of Stories and/or basement	Use	# pof	W/ Sewer/s Is on 1	What Type of Sewer/Sanitary System Is on the property?	Water
*	□ New Construction	truction	S1-Story	☐ Seasonal	□ 1	☐ Municipal/City	and the management of the second	☐ City
) >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>	Addition/Alteration	Alteration	☐ 1-Story + Loft	Year Round	□ 2	□ (New) Sanitary	Specify Type:	- Xwell
\$ 00000	☐ Conversion	3	2-Story		□ 3	Sanitary (Exists) Speci	Mrsey ileatu	T
	Relocate (existing bldg)	existing bldg)	□ Basement			☐ Privy (Pit) or ☐ Vau	Vaulted (min 200 gallon)	on)
1	Run a Business on	iness on	 No Basement 		None	☐ Portable (w/service con	vice contract)	
	Property		☐ Foundation		Þ	☐ Compost Toilet		
				- Adam and the Ada		None	Tagenting the second	
Existing Structure: (If permit being applied for is relevant to it)	: (if permit be	ng applied for	is relevant to it)	Length: 32		Width: 42_	Height:	5/01/7
Proposed Construction:	ction:			Length: /4	M.	Width: 16	Height	Station
Proposed Use	· ·	2 <u>45</u>		Proposed Structure	Ċ		Dimensions	Square Footage
		Principal S	Principal Structure (first structure on property)	ture on property)			(x)	
	0	1	Residence (i.e. cabin, hunting shack, etc. with Loft	shack, etc.)		÷ + + + + + multiple	(x)	
Residential Use	Jse		with a Porch				(x)	
			with (2 nd) Porch			The state of the s	(x)	
Rec'd for Issuance	suance		with a Deck				(x	
			with (2 nd) Deck		- Arthering		(x	
Colfingenoial notific	Z		with Attached Garage	rage			(x	
		Bunkhous	Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	☐ sleeping quarters,	or 🗆 cooking &	ι food prep facilities)	(×	
Secretarial Staff	Star	Mobile H	Wlobile Home (manufactured date	ite)	44.00		×	
,	X	Addition/	Addition/Alteration (specify)	18416 6	rout ent	oy with	SCHERX POR	K 224
Municipal Use	se /	Accessory Building	Building (specify)			A STATE OF THE STA	(8 ×/4)	112
		Accessor	Accessory Building Addition/Alteration (specify)	Alteration (specify)	- Andrews - Andr		(x /)	
			and account from the field of t	and the second s			- Carlottenanta	ALCO DE LA COLONIA DE LA COLON
		Special U	Special Use: (explain)	Addition on the desired of the second		-	(x	
		Condition	Conditional Use: (explain)	Annahatative and an annahatative and annahatative and an annahatat		- Fig. 10 to	×	
	_) the '	-1-1-1				×	

FAILURE TO OBTAIN A PERMIT ONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy destruction ((we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on Anis information I (we) am (are) providing in or with this application. I (we) county or officials charged with administering county ordinances to have access to the

Owner(s): (If there are Mu Authorized Agent: ıust sign <u>or</u> letter(s) DVG must accompany this application)

Date σ

ompany this appli

Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Address to send permit

you are signing on

If of the owner(s) a letter of $\frac{1}{2}$

All Excitation and Marking Schools in contrast and the property of the contrast of the plants of the
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city, Village, State or Federal May Also Be Required

AND USE - X SANITARY - 13550 (7/22/1981) sign -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.

17-0306

Issued To:

Janet Bewley & David Saetre

46 N. Range 7 W. Town of Delta Location: **NE** ¼ of NE 1/4 Section 21 Township LESS THAT PART LYING SOUTH OF WHITE RIVER & LESS PAR DESC IN V.221 P.303 TOG WITH S 50' SE SE SEC 16

Gov't Lot

Lot

Block

Subdivision

CSM#

For:Residential Addition / Alteration: [1- Story; Entry (14' x 16') = 224 sq. ft.; Screen Porch (8' x 14') = 112 sq. ft.] Total Overall = 336 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): UDC permit from the locally contracted UDC inspection agency must be obtained prior to the start of construction. Must meet and maintain setbacks.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

> Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete. This permit may be void or revoked if any performance conditions are not

Authorized Issuing Official

Tracy Pooler

August 2, 2017

Date

completed or if any prohibitory conditions are violated.